

| CLAIMS ONLY | | | | | | SERIAL NO. <div style="text-align: center; font-family: cursive;">09884200</div> | FILING DATE | | | | | | |
|--------------|----------|------|------------------------|------|------------------------|---|-------------|------|------|------|------|------|------|
| | | | | | | APPLICANT(S) | | | | | | | |
| CLAIMS | | | | | | | | | | | | | |
| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | * | | * | | * | |
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| TOTAL IND. | 3 | | 2 | | | | | | | | | | |
| TOTAL DEP. | | 37 | | 25 | | | | | | | | | |
| TOTAL CLAIMS | 40 | | 27 | | | | | | | | | | |
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| TOTAL IND. | | | | | | | | | | | | | |
| TOTAL DEP. | | | | | | | | | | | | | |
| TOTAL CLAIMS | | | | | | | | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS